



***Cyclospora* Infection (Cyclosporiasis)**

What is *Cyclospora*?

Cyclospora cayetanensis (SIGH-clo-SPORE-uh KYE-uh-tuh-NEN-sis) is a parasite composed of one cell, too small to be seen without a microscope. This parasite causes an intestinal infection called cyclosporiasis.

How is *Cyclospora* spread?

Cyclospora is spread by people ingesting something, such as food or water, that was contaminated with feces (stool). *Cyclospora* needs time (days or weeks) after being passed in a bowel movement to become infectious for another person. Therefore, it is unlikely that *Cyclospora* is passed directly from one person to another.

Who is at risk for *Cyclospora* infection?

People of all ages are at risk for infection. Persons living or traveling in tropical or subtropical regions may be at increased risk because cyclosporiasis is endemic (found) in some developing countries. Foodborne outbreaks of cyclosporiasis in the United States and Canada have been linked to various types of imported fresh produce.

What are the symptoms of *Cyclospora* infection?

The time between becoming infected and becoming sick is usually about 1 week. *Cyclospora* infects the small intestine (bowel) and usually causes watery diarrhea, with frequent, sometimes explosive, bowel movements. Other common symptoms include loss of appetite, weight loss, stomach cramps/pain, bloating, increased gas, nausea, and fatigue. Vomiting, body aches, headache, fever, and other flu-like symptoms may be noted. Some people who are infected with *Cyclospora* do not have any symptoms.

How long can the symptoms last?

If not treated, the illness may last from a few days to a month or longer. Symptoms may seem to go away and then return one or more times (relapse). It's common to feel very tired.

What should I do if I think I might be infected with *Cyclospora*?

See your health care provider.

How is *Cyclospora* infection diagnosed?

Your health care provider will ask you to submit stool specimens to see if you are infected. Because testing for *Cyclospora* infection can be difficult, you may be asked to

submit more than one specimen from different days. Identification of this parasite in stool requires special laboratory tests that are not routinely done. Therefore, if indicated, your health care provider should specifically request testing for *Cyclospora*. In addition, your health care provider might have your stool checked for other organisms that can cause similar symptoms.

How is *Cyclospora* infection treated?

The recommended treatment is a combination of two antibiotics, trimethoprim-sulfamethoxazole, also known as Bactrim*, Septra*, or Cotrim*. People who have diarrhea should also rest and drink plenty of fluids.

I am allergic to sulfa drugs; is there another drug I can take?

No highly effective alternative drugs have been identified yet for people with *Cyclospora* infection who are unable to take sulfa drugs. See your health care provider to discuss potential options.

How is *Cyclospora* infection prevented?

Avoiding water or food that may be contaminated with stool may help prevent *Cyclospora* infection. People who have previously been infected with *Cyclospora* can become infected again.

*Use of trade names is for identification only and does not imply endorsement by the Public Health Service or by the U.S. Department of Health and Human Services.

This fact sheet is for information only and is not meant to be used for self-diagnosis or as a substitute for consultation with a health care provider. If you have any questions about the disease described above or think that you may have a parasitic infection, consult a health care provider.

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http://www.cdc.gov/ncidod/dpd/parasites/cyclospora/cyclospora_factsheet.html



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